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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Applicati n Numb r</b>	09/973,572		
	<b>Filing Dat</b>	October 9, 2001	
	<b>First Named Inventor</b>	Yaniv Gvily 2164	
	<b>Group Art Unit</b>		
<b>Examiner Name</b>			
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	017900-001610US

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement Under 37 CFR §1.97 and §1.98  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Notification of Missing Requirements Under 35 U.S.C. §371  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Return Postcard  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copies of four (4) cited references. Copy of the Search/Examination report.
<b>Remarks</b>		<b>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</b>

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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm and Individual name</b>	Townsend and Townsend and Crew LLP Stephen F. Jewett, Reg. No. 27,565
<b>Signature</b>	
<b>Date</b>	2/5/02

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 2/5/02

<b>Typed or printed name</b>	Jennifer Gallant		
<b>Signature</b>		<b>Date</b>	2/5/02

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PATENT  
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Washington, D.C. 20231



February 5, 2002

TOWNSEND and TOWNSEND and CREW LLP

By: Jennifer Hallant

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Yaniv Gvily

Application No.: 09/973,572

Filed: October 9, 2001

For: USER IMPERSONATION BY A  
PROXY SERVER

Examiner:

Art Unit:

INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98

Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

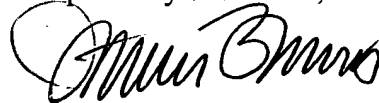
The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. Also enclosed is a copy of the Search/Examination report corresponding to the PCT application. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement, since it is being submitted prior to the first Office Action. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Stephen F. Jewett  
Reg. No. 27,565

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, 8<sup>th</sup> Floor  
San Francisco, California 94111-3834  
Tel: 303-571-4000  
Fax: 303-571-4321  
SFJ:cc



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Substitute for form 1449B/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet **3**

of

### Complete if Known

Application Number	
Filing Date	
First Named Inventor	Gvily, Yaniv
Group Art Unit	
Examiner Name	
Attorney Docket Number	017900-001610US

### U.S. PATENT DOCUMENTS

Examiner Initials *	Cite No. <sup>1</sup>	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code <sup>2</sup> (if known)			
	AA	5,991,810		Shapiro et al.	11/23/1999	
	AB	6,092,196		Reiche	07/18/2000	
	AC	6,182,142		Win et al.	01/30/2001	
	AD	6,233,577		Ramasubramani et al.	05/15/2001	

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### FOREIGN PATENT DOCUMENTS

Examiner Initials *	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				

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### OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Unique citation designation number. <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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